

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MARY D. GRAHAM

Name

(2) 6170 NW 32 TERRACE

Address (number and street)

FT. LAUDERDALE FL 33309

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought):

DISTRICT ONE CITY COMMISSION FT LAUDERDALE

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 12/24/11 To 01/06/12 Report Type _____

☐ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0

Transfers to Office Account \$ 0

Total Monetary \$ 0

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date
\$ 600.00

(10) TOTAL Monetary Expenditures To Date
\$ 47.50

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) MARY D. GRAHAM

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X Mary D. Graham
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) MARY D. GRAHAM

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X Mary D. Graham
Signature